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## **Detached and Torn Retina**

A retinal detachment (RD) is a very serious problem that frequently causes blindness unless treated. The appearance of flashing lights, floating objects, or a gray curtain moving across the field of vision are all indications of a retinal detachment. If any of these occur, see an ophthalmologist right away.

As one gets older, the vitreous, the clear gel-like substance that fills the inside of the eye, tends to shrink slightly and take on a more watery consistency. Sometimes as the vitreous shrinks it exerts enough force on the retina as it pulls away to make it tear.

Retinal tears increase the chance of developing a retinal detachment. Fluid from the vitreous, passing through the tear, lifts the retina off the back of the eye like wallpaper peeling off a wall. Laser surgery or cryotherapy (freezing) are often used to seal retinal tears and prevent detachment when a tear is detected early enough.

If the retina is detached, it must be reattached before sealing the retinal tear. There are three ways to repair retinal detachments. Pneumatic retinopexy involves injecting a special gas bubble into the eye that pushes on the retina to seal the tear. The scleral buckle procedure requires the fluid to be drained from under the retina before a flexible piece of silicone is sewn on the outer eye wall to give support to the tear while it heals. Vitrectomy surgery removes the vitreous gel from the eye, replacing it with a gas bubble, which is slowly replaced by the body's fluids, or with saline fluid or silicone oil. The latter often is used with recurrent RD and may be removed in a subsequent surgery. Cataracts may develop after retinal detachment surgery.